

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000098794

1. Entity Name
SST PROPERTIES, INC.



Principal Place of Business
2710 ALTERNATE 19 NORTH
STE 402
PALM HARBOR, FL 34683

Mailing Address
2710 ALTERNATE 19 NORTH
STE 402
PALM HARBOR, FL 34683



04072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3479205

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLENNER, WALTER W
2708 ALT. 19 NORTH, SUITE 701
PALM HARBOR, FL 34683

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SCHUMACHER, DONALD J
STREET ADDRESS	3564 WOODRIDGE PLACE
CITY-ST-ZIP	PALM HARBOR, FL 34683
TITLE	DVP
NAME	DUGAN, MICHAEL
STREET ADDRESS	2119 CROSBY ROAD
CITY-ST-ZIP	WAYZATA, MN 55391
TITLE	DT
NAME	SNYDER, RICHARD A
STREET ADDRESS	643 BELTED KINGFISHER DRIVE NORTH
CITY-ST-ZIP	PALM HARBOR, FL 34683
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/11/05-80035-016 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Donald J. Schumacher

4/8/05

727-786-6206

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #